

CERCLA REMOVAL ACTION DAILY WORK ORDER

DAILY WORK ORDER

RESPONSE LOCATION (SITE NAME
AND/OR ADDRESS AND ZIP CODE)

CONTRACT NO.

ORDER NO.

DATE

SHIFT

SITE/SPILL NO.

EPA REGION/USDG DIST.

ON-SCENE COORDINATOR

CONTRACTOR

CONTRACTOR RESPONSE MANAGER

1.

MONITOR(S)

2.

DESCRIPTION OF WORK TO BE PERFORMED

Six hours of off-site work authorized for Foreman
for key cut data entry of drum logs into computer
tracking system

NUMBER OF PERSONNEL AUTHORIZED

.....SUPERVISORS

...../...FOREMAN

.....OPERATORS

.....LABORERS

.....OTHER (SPECIFY).....

4.

EQUIPMENT AND EXPENDABLE MATERIALS AUTHORIZED

ITEM	QUANTITY	ITEM	QUANTITY
Computer	1		
printer	1		

I CERTIFY THAT THE ABOVE WORK IS ORDERED AND
AUTHORIZED BY THE CONTRACTOR IN THE PER-
FORMANCE OF THE ABOVE CITED DELIVERY ORDER.

I ACKNOWLEDGE RECEIPT OF THIS WORK ORDER.

SIGNATURE OF OSC

SIGNATURE OF CONTRACTOR'S REPRESENTATIVE

AMENDMENTS (INCLUDE TIME AND AUTHORIZING PERSON)

SIGNATURE OF OSC

SIGNATURE OF CONTRACTOR'S REPRESENTATIVE

ORIGINAL

442497

